

Effective October 1, 2003

10 771 939

| (Column 1) | (Column 2) |
|------------|------------|
| 1 | 2 |
| 3 | 4 |
| 5 | 6 |
| 7 | 8 |
| 9 | 10 |
| 11 | 12 |
| 13 | 14 |
| 15 | 16 |
| 17 | 18 |
| 19 | 20 |
| 21 | 22 |
| 23 | 24 |
| 25 | 26 |
| 27 | 28 |
| 29 | 30 |
| 31 | 32 |
| 33 | 34 |
| 35 | 36 |
| 37 | 38 |
| 39 | 40 |
| 41 | 42 |
| 43 | 44 |
| 45 | 46 |
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| 69 | 70 |
| 71 | 72 |
| 73 | 74 |
| 75 | 76 |
| 77 | 78 |
| 79 | 80 |
| 81 | 82 |
| 83 | 84 |
| 85 | 86 |
| 87 | 88 |
| 89 | 90 |
| 91 | 92 |
| 93 | 94 |
| 95 | 96 |
| 97 | 98 |
| 99 | 100 |

| | | |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS | 22 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 22 minus 20 = | * 2 |
| INDEPENDENT CLAIMS | 4 minus 3 = | * 1 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

| (Column 1) | (Column 2) | (Column 3) |
|------------|------------|------------|
| 1 | 2 | 3 |
| 4 | 5 | 6 |
| 7 | 8 | 9 |
| 10 | 11 | 12 |
| 13 | 14 | 15 |
| 16 | 17 | 18 |
| 19 | 20 | 21 |
| 22 | 23 | 24 |
| 25 | 26 | 27 |
| 28 | 29 | 30 |
| 31 | 32 | 33 |
| 34 | 35 | 36 |
| 37 | 38 | 39 |
| 40 | 41 | 42 |
| 43 | 44 | 45 |
| 46 | 47 | 48 |
| 49 | 50 | 51 |
| 52 | 53 | 54 |
| 55 | 56 | 57 |
| 58 | 59 | 60 |
| 61 | 62 | 63 |
| 64 | 65 | 66 |
| 67 | 68 | 69 |
| 70 | 71 | 72 |
| 73 | 74 | 75 |
| 76 | 77 | 78 |
| 79 | 80 | 81 |
| 82 | 83 | 84 |
| 85 | 86 | 87 |
| 88 | 89 | 90 |
| 91 | 92 | 93 |
| 94 | 95 | 96 |
| 97 | 98 | 99 |
| 100 | 101 | 102 |
| 103 | 104 | 105 |
| 106 | 107 | 108 |
| 109 | 110 | 111 |
| 112 | 113 | 114 |
| 115 | 116 | 117 |
| 118 | 119 | 120 |
| 121 | 122 | 123 |
| 124 | 125 | 126 |
| 127 | 128 | 129 |
| 130 | 131 | 132 |
| 133 | 134 | 135 |
| 136 | 137 | 138 |
| 139 | 140 | 141 |
| 142 | 143 | 144 |
| 145 | 146 | 147 |
| 148 | 149 | 150 |
| 151 | 152 | 153 |
| 154 | 155 | 156 |
| 157 | 158 | 159 |
| 160 | 161 | 162 |
| 163 | 164 | 165 |
| 166 | 167 | 168 |
| 169 | 170 | 171 |
| 172 | 173 | 174 |
| 175 | 176 | 177 |
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| 211 | 212 | 213 |
| 214 | 215 | 216 |
| 217 | 218 | 219 |
| 220 | 221 | 222 |
| 223 | 224 | 225 |
| 226 | 227 | 228 |
| 229 | 230 | 231 |
| 232 | 233 | 234 |
| 235 | 236 | 237 |
| 238 | 239 | 240 |
| 241 | 242 | 243 |
| 244 | 245 | 246 |
| 247 | 248 | 249 |
| 250 | 251 | 252 |
| 253 | 254 | 255 |
| 256 | 257 | 258 |
| 259 | 260 | 261 |
| 262 | 263 | 264 |
| 265 | 266 | 267 |
| 268 | 269 | 270 |
| 271 | 272 | 273 |
| 274 | 275 | 276 |
| 277 | 278 | 279 |
| 280 | 281 | 282 |
| 283 | 284 | 285 |
| 286 | 287 | 288 |
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| 292 | 293 | 294 |
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| 298 | 299 | 300 |
| 301 | 302 | 303 |
| 304 | 305 | 306 |
| 307 | 308 | 309 |
| 310 | 311 | 312 |
| 313 | 314 | 315 |
| 316 | 317 | 318 |
| 319 | 320 | 321 |
| 322 | 323 | 324 |
| 325 | 326 | 327 |
| 328 | 329 | 330 |
| 331 | 332 | 333 |
| 334 | 335 | 336 |
| 337 | 338 | 339 |
| 340 | 341 | 342 |
| 343 | 344 | 345 |
| 346 | 347 | 348 |
| 349 | 350 | 351 |
| 352 | 353 | 354 |
| 355 | 356 | 357 |
| 358 | 359 | 360 |
| 361 | 362 | 363 |
| 364 | 365 | 366 |
| 3 | | |

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|-------------|----------------------------------|-------|------------------------------------|---------------|
| | Total | * | Minus | ** |
| Independent | * | Minus | *** | = |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐

OTHER THAN
OF SMALL ENTITY.

| RATE | FEE | | RATE | FEE |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 385.00 | OR | BASIC FEE | 770.00 |
| XS 9= | | OR | XS18= | 126 |
| X43= | | OR | X86= | 86 |
| +145= | | OR | +290= | |
| TOTAL | | OR | TOTAL | 982 |

AMENDMENT B

| | | (Column 1) | | (Column 2) | (Column 3) |
|---|-------------|---|-------|---|------------------|
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | * | Minus | ** | = |
| | Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | |

| SMALL ENTITY | OR | OTHER THAN SMALL ENTITY |
|---|----|-------------------------|
| <p>1. Name of the applicant:</p> <p>2. Address of the applicant:</p> <p>3. City:</p> <p>4. State:</p> <p>5. Zip:</p> <p>6. Title of the inventor:</p> <p>7. Name of the inventor:</p> <p>8. Address of the inventor:</p> <p>9. City:</p> <p>10. State:</p> <p>11. Zip:</p> <p>12. Title of the inventor:</p> <p>13. Name of the inventor:</p> <p>14. Address of the inventor:</p> <p>15. City:</p> <p>16. State:</p> <p>17. Zip:</p> <p>18. Title of the inventor:</p> <p>19. Name of the inventor:</p> <p>20. Address of the inventor:</p> <p>21. City:</p> <p>22. State:</p> <p>23. Zip:</p> <p>24. Title of the inventor:</p> <p>25. Name of the inventor:</p> <p>26. Address of the inventor:</p> <p>27. City:</p> <p>28. State:</p> <p>29. Zip:</p> <p>30. Title of the inventor:</p> <p>31. Name of the inventor:</p> <p>32. Address of the inventor:</p> <p>33. City:</p> <p>34. State:</p> <p>35. Zip:</p> <p>36. Title of the inventor:</p> <p>37. Name of the inventor:</p> <p>38. Address of the inventor:</p> <p>39. City:</p> <p>40. State:</p> <p>41. Zip:</p> <p>42. Title of the inventor:</p> <p>43. Name of the inventor:</p> <p>44. Address of the inventor:</p> <p>45. City:</p> <p>46. State:</p> <p>47. Zip:</p> <p>48. Title of the inventor:</p> <p>49. Name of the inventor:</p> <p>50. Address of the inventor:</p> <p>51. City:</p> <p>52. State:</p> <p>53. Zip:</p> <p>54. Title of the inventor:</p> <p>55. Name of the inventor:</p> <p>56. Address of the inventor:</p> <p>57. City:</p> <p>58. State:</p> <p>59. Zip:</p> <p>60. Title of the inventor:</p> <p>61. Name of the inventor:</p> <p>62. Address of the inventor:</p> <p>63. City:</p> <p>64. State:</p> <p>65. Zip:</p> <p>66. Title of the inventor:</p> <p>67. Name of the inventor:</p> <p>68. Address of the inventor:</p> <p>69. City:</p> <p>70. State:</p> <p>71. Zip:</p> <p>72. Title of the inventor:</p> <p>73. Name of the inventor:</p> <p>74. Address of the inventor:</p> <p>75. City:</p> <p>76. State:</p> <p>77. Zip:</p> <p>78. Title of the inventor:</p> <p>79. Name of the inventor:</p> <p>80. Address of the inventor:</p> <p>81. City:</p> <p>82. State:</p> <p>83. Zip:</p> <p>84. Title of the inventor:</p> <p>85. Name of the inventor:</p> <p>86. Address of the inventor:</p> <p>87. City:</p> <p>88. State:</p> <p>89. Zip:</p> <p>90. Title of the inventor:</p> <p>91. Name of the inventor:</p> <p>92. Address of the inventor:</p> <p>93. City:</p> <p>94. State:</p> <p>95. Zip:</p> <p>96. Title of the inventor:</p> <p>97. Name of the inventor:</p> <p>98. Address of the inventor:</p> <p>99. City:</p> <p>100. State:</p> <p>101. Zip:</p> <p>102. Title of the inventor:</p> <p>103. Name of the inventor:</p> <p>104. Address of the inventor:</p> <p>105. City:</p> <p>106. State:</p> <p>107. Zip:</p> <p>108. Title of the inventor:</p> <p>109. Name of the inventor:</p> <p>110. Address of the inventor:</p> <p>111. City:</p> <p>112. State:</p> <p>113. Zip:</p> <p>114. Title of the inventor:</p> <p>115. Name of the inventor:</p> <p>116. Address of the inventor:</p> <p>117. City:</p> <p>118. State:</p> <p>119. Zip:</p> <p>120. Title of the inventor:</p> <p>121. Name of the inventor:</p> <p>122. Address of the inventor:</p> <p>123. City:</p> <p>124. State:</p> <p>125. Zip:</p> <p>126. Title of the inventor:</p> <p>127. Name of the inventor:</p> <p>128. Address of the inventor:</p> <p>129. City:</p> <p>130. State:</p> <p>131. Zip:</p> <p>132. Title of the inventor:</p> <p>133. Name of the inventor:</p> <p>134. Address of the inventor:</p> <p>135. City:</p> <p>136. State:</p> <p>137. Zip:</p> <p>138. Title of the inventor:</p> <p>139. Name of the inventor:</p> <p>140. Address of the inventor:</p> <p>141. City:</p> <p>142. State:</p> <p>143. Zip:</p> <p>144. Title of the inventor:</p> <p>145. Name of the inventor:</p> <p>146. Address of the inventor:</p> <p>147. City:</p> <p>148. State:</p> <p>149. Zip:</p> <p>150. Title of the inventor:</p> <p>151. Name of the inventor:</p> <p>152. Address of the inventor:</p> <p>153. City:</p> <p>154. State:</p> <p>155. Zip:</p> <p>156. Title of the inventor:</p> <p>157. Name of the inventor:</p> <p>158. Address of the inventor:</p> <p>159. City:</p> <p>160. State:</p> <p>161. Zip:</p> <p>162. Title of the inventor:</p> <p>163. Name of the inventor:</p> <p>164. Address of the inventor:</p> <p>165. City:</p> <p>166. State:</p> <p>167. Zip:</p> <p>168. Title of the inventor:</p> <p>169. Name of the inventor:</p> <p>170. Address of the inventor:</p> <p>171. City:</p> <p>172. State:</p> <p>173. Zip:</p> <p>174. Title of the inventor:</p> <p>175. Name of the inventor:</p> <p>176. Address of the inventor:</p> <p>177. City:</p> <p>178. State:</p> <p>179. Zip:</p> <p>180. Title of the inventor:</p> <p>181. Name of the inventor:</p> <p>182. Address of the inventor:</p> <p>183. City:</p> <p>184. State:</p> <p>185. Zip:</p> <p>186. Title of the inventor:</p> <p>187. Name of the inventor:</p> <p>188. Address of the inventor:</p> <p>189. City:</p> <p>190. State:</p> <p>191. Zip:</p> <p>192. Title of the inventor:</p> <p>193. Name of the inventor:</p> <p>194. Address of the inventor:</p> <p>195. City:</p> <p>196. State:</p> <p>197. Zip:</p> <p>198. Title of the inventor:</p> <p>199. Name of the inventor:</p> <p>200. Address of the inventor:</p> <p>201. City:</p> <p>202. State:</p> <p>203. Zip:</p> <p>204. Title of the inventor:</p> <p>205. Name of the inventor:</p> <p>206. Address of the inventor:</p> <p>207. City:</p> <p>208. State:</p> <p>209. Zip:</p> <p>210. Title of the inventor:</p> <p>211. Name of the inventor:</p> <p>212. Address of the inventor:</p> <p>213. City:</p> <p>214. State:</p> <p>215. Zip:</p> <p>216. Title of the inventor:</p> <p>217. Name of the inventor:</p> <p>218. Address of the inventor:</p> <p>219. City:</p> <p>220. State:</p> <p>221. Zip:</p> <p>222. Title of the inventor:</p> <p>223. Name of the inventor:</p> <p>224. Address of the inventor:</p> <p>225. City:</p> <p>226. State:</p> <p>227. Zip:</p> <p>228. Title of the inventor:</p> <p>229. Name of the inventor:</p> <p>230. Address of the inventor:</p> <p>231. City:</p> <p>232. State:</p> <p>233. Zip:</p> <p>234. Title of the inventor:</p> <p>235. Name of the inventor:</p> <p>236. Address of the inventor:</p> <p>237. City:</p> <p>238. State:</p> <p>239. Zip:</p> <p>240. Title of the inventor:</p> <p>241. Name of the inventor:</p> <p>242. Address of the inventor:</p> <p>243. City:</p> <p>244. State:</p> <p>245. Zip:</p> <p>246. Title of the inventor:</p> <p>247. Name of the inventor:</p> <p>248. Address of the inventor:</p> <p>249. City:</p> <p>250. State:</p> <p>251. Zip:</p> <p>252. Title of the inventor:</p> <p>253. Name of the inventor:</p> <p>254. Address of the inventor:</p> <p>255. City:</p> <p>256. State:</p> <p>257. Zip:</p> <p>258. Title of the inventor:</p> <p>259. Name of the inventor:</p> <p>260. Address of the inventor:</p> <p>261. City:</p> <p>262. State:</p> <p>263. Zip:</p> <p>264. Title of the inventor:</p> <p>265. Name of the inventor:</p> <p>266. Address of the inventor:</p> <p>267. City:</p> <p>268. State:</p> <p>269. Zip:</p> <p>270. Title of the inventor:</p> <p>271. Name of the inventor:</p> <p>272. Address of the inventor:</p> <p>273. City:</p> <p>274. State:</p> <p>275. Zip:</p> <p>276. Title of the inventor:</p> <p>277. Name of the inventor:</p> <p>278. Address of the inventor:</p> <p>279. City:</p> <p>280. State:</p> <p>281. Zip:</p> <p>282. Title of the inventor:</p> <p>283. Name of the inventor:</p> <p>284. Address of the inventor:</p> <p>285. City:</p> <p>286. State:</p> <p>287. Zip:</p> <p>288. Title of the inventor:</p> <p>289. Name of the inventor:</p> <p>290. Address of the inventor:</p> <p>291. City:</p> <p>292. State:</p> <p>293. Zip:</p> <p>294. Title of the inventor:</p> <p>295. Name of the inventor:</p> <p>296. Address of the inventor:</p> <p>297. City:</p> <p>298. State:</p> <p>299. Zip:</p> <p>300. Title of the inventor:</p> <p>301. Name of the inventor:</p> <p>302. Address of the inventor:</p> <p>303. City:</p> <p>304. State:</p> <p>305. Zip:</p> <p>306. Title of the inventor:</p> <p>307. Name of the inventor:</p> <p>308. Address of the inventor:</p> <p>309. City:</p> <p>310. State:</p> <p>311. Zip:</p> <p>312. Title of the inventor:</p> <p>313. Name of the inventor:</p> <p>314. Address of the inventor:</p> <p>315. City:</p> <p>316. State:</p> <p>317. Zip:</p> <p>318. Title of the inventor:</p> <p>319. Name of the inventor:</p> <p>320. Address of the inventor:</p> <p>321. City:</p> <p>322. State:</p> <p>323. Zip:</p> <p>324. Title of the inventor:</p> <p>325. Name of the inventor:</p> <p>326. Address of the inventor:</p> <p>327. City:</p> <p>328. State:</p> <p>329. Zip:</p> <p>330. Title of the inventor:</p> <p>331. Name of the inventor:</p> <p>332. Address of the inventor</p> | | |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|---------------------|----------------|----|---------------------|----------------|
| XS 9= | | OR | XS18= | |
| X43= | | OR | X86= | |
| +145= | | OR | +290= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

AMENDMENT C

| AMENDMENT C | | (Column 1) | | (Column 2) | (Column 3) |
|---|-------------|---|-------|---|------------------|
| | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total | * | Minus | ** | = |
| | Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | |

| | | | | |
|---------------------|----------------|----|---------------------|----------------|
| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= | |
| X43= | | OR | X86= | |
| +145= | | OR | +290= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|--------------------|----------------|----|--------------------|----------------|
| X\$ 9= | | OR | X\$18= | |
| X43= | | OR | X86= | |
| +145= | | OR | +290= | |
| TOTAL ADDIT FEE | | OR | TOTAL ADDIT FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.